

**UNITED STATES NATIONAL STAGE WORKSHEET (DO/EO)**

Charitta Burt, Paralegal

U. S. Application No. 10/502143  
Publication Date \_\_\_\_\_  
Publication No. WO 03, 063346 PCT/RO/101 \_\_\_\_\_  
Copy of ISR EF, Copy of IPER \_\_\_\_\_  
Assignee: \_\_\_\_\_  
Priority Info: Country EP No. 02075304.2 date 1.24.02 MORE (turn over) \_\_\_\_\_  
Correspondence checked: \_\_\_\_\_  
Inventor Name checked: F Dirk L BREEBAART  
Inventor Residence city: Bindhoven, state and/or country NL citizenship: NL  
International Application No. PCT IB2002, 005674 Language Eng  
Copy of ISR: ✓  
Copy in International Application: ✓; Translation: yes \_\_\_\_\_ no \_\_\_\_\_  
371 Filing Fees: 920; meets Art. 33(2)-(3) Low fee applies: \_\_\_\_\_  
Total Claims: 10 Chargeable 10 Independent 1 multiple 10  
Number of drawing Sheets: 3 Foreign language: \_\_\_\_\_  
Oath/Declaration: ✓; signed ✓ unsigned \_\_\_\_\_ defective \_\_\_\_\_ completed 7.20.05  
Small entity fee: \_\_\_\_\_; SME papers: yes \_\_\_\_\_ no \_\_\_\_\_  
Bio Seq. Diskette: \_\_\_\_\_ entered \_\_\_\_\_ Bio Seq. Listing: \_\_\_\_\_ statement \_\_\_\_\_  
References \_\_\_\_\_  
Copy of IPER: \_\_\_\_\_; Annexes: ✓ entered \_\_\_\_\_ not entered \_\_\_\_\_  
Preliminary Amendment(s): ✓ date: 7.20.04; 2nd amendment date \_\_\_\_\_  
IDS: \_\_\_\_\_ DATE: \_\_\_\_\_ 2nd \_\_\_\_\_ DATE \_\_\_\_\_  
Request for Immediate Examination: \_\_\_\_\_  
Substitute Specification: \_\_\_\_\_ date: \_\_\_\_\_  
Assignment: ✓ forwarded to Assignment branch date: 3.7.05  
Priority Document(s): ✓ date 7.20.04; Number of copies included 1  
Power of Attorney: ✓  
Abstract: ✓  
Date of 35 USC Receipt of Request: 7.20.04 Notes: \_\_\_\_\_  
Date Completion USC 371 Requirements: 7.20.04  
Notice of Missing Requirements: \_\_\_\_\_  
Notice of Defective Response: \_\_\_\_\_  
Notice of Acceptance: 3.17.05  
Notice of Abandonment: \_\_\_\_\_  
Other forms: \_\_\_\_\_  
Article 19 Amendment: yes \_\_\_\_\_ no \_\_\_\_\_; replaced by Article 34 Amdt. \_\_\_\_\_  
Extension of time: Number of months \_\_\_\_\_